



## Tasmanian Association of Municipal Supervisors Inc.

ABN 73036265299

### MEMBERSHIP APPLICATION FORM

I \_\_\_\_\_  
Given Name Surname

Preferred name for badge: \_\_\_\_\_ Council/Company Name \_\_\_\_\_

Polo shirt size: (Please circle)      S      M      L      XL      XXL

Current Position: \_\_\_\_\_

Home Address: \_\_\_\_\_

Town: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone:  
Business: \_\_\_\_\_ Home: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

**Desire to become a member of the Tasmanian Association of Municipal Supervisors Inc. In the event of my admission as a member, I agree to be bound by the rules of the association for the time being in force.**

Signed (applicant): \_\_\_\_\_ Date: \_\_\_\_\_

I \_\_\_\_\_ A full member of the Association, nominate the applicant, who is personally know to me, for membership of the Association.

Signed: \_\_\_\_\_ Print Name: \_\_\_\_\_

#### Membership Category and Fees (fixed at the AGM of the Association)

- |                          |                |                                  |
|--------------------------|----------------|----------------------------------|
| <input type="checkbox"/> | Full Member    | \$ 50.00                         |
| <input type="checkbox"/> | Affiliate      | \$ 30.00                         |
| <input type="checkbox"/> | Corporate      | \$ 120.00+ \$ 100.00 joining fee |
| <input type="checkbox"/> | Retired Member | \$ 30.00                         |

#### Please forward to:

**TAMS Secretary, 366 Tranmere Road, Tranmere 7018**

Or [pdonato@ccc.tas.gov.au](mailto:pdonato@ccc.tas.gov.au)

**PRESIDENT:** Peter Donato Ph: 0419 306 795

**VICE PRESIDENT:** Rob Whittle Ph: 0419 510 618

Office Use Only					
Fees Paid	<input type="checkbox"/>	Mail List and Registration	<input type="checkbox"/>	Welcome Letter	<input type="checkbox"/>
Badge Ordered	<input type="checkbox"/>	Kit	<input type="checkbox"/>	Polo shirt supplied	<input type="checkbox"/>